2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000001819

Current Principal Place of Business:

Entity Name: HELPING HANDS IN MOTION INC.

FILED Mar 24, 2009 Secretary of State

743 NW BISCAYNE DR PORT SAINT LUCIE, FL 349831507 US **Current Mailing Address: New Mailing Address:** 743 NW BISCAYNE DR PORT SAINT LUCIE, FL 349831507 US FEI Number: 59-3449510 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FIELDS, RICHARD A 743 NW BISCAYNE DR PORT SAINT LUCIE, FL 349831507 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BOEDEKER, JOHN FIELDS, RICHARD A Name: Name: 412 GINGERBREAD LANE Address: 743 NW BISCAYNE DRIVE Address: City-St-Zip: WAXAHACHIE, TX 75165 US City-St-Zip: PORT ST. LUCIE, FL 34983 US Title: CD () Delete Title: (X) Change () Addition CARR, ROSELLA A Name: BOEDEKER, JOHN E Name: Address: PO 788 E CENTRAL AVE Address: 412 GINGERBREAD LANE

City-St-Zip:

Title:

Name:

Address:

City-St-Zip:

Title: () Delete Name:

STD

()Delete

FIELDS, DEBORAH V

743 NW BISCAYNE DR

EAGLE LAKE, FL 33839 US

() Delete

PORT SAINT LUCIE, FL 34983 US

Title: () Delete Name:

Address: City-St-Zip:

City-St-Zip:

City-St-Zip:

Title:

Name:

Address:

Address:

City-St-Zip:

City-St-Zip:

Title: () Delete Name: Address: Title: STD () Change (X) Addition

CARR, ROSELLA A

788 E. CENTRAL AVE.

WAXAHACHIE, TX 75165 US

EAGLE LAKE, FL 33839 US

(X) Change () Addition

Name: FIELDS, DEBORAH V
Address: 743 NW BISCAYNE DRIVE
City-St-Zip: PORT ST. LUCIE, FL 34983 US

New Principal Place of Business:

Title: D () Change (X) Addition

Name: HUEBNER, DENNIS W
Address: 18322 SWAN LAKE DRIVE
City-St-Zip: LUTZ, FL 33549 US

Title: D () Change (X) Addition

Name: LANMAN, ABBY

Address: 18970 S. CANYON CREEK ROAD City-St-Zip: CLAREMORE, OK 73170 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD A. FIELDS ED 03/24/2009